

Applicant Name (*Last, First*)

College/University Attended

REQUIREMENT	COURSE Name(s) and/or Number(s) (Attach course syllabus if available)
(iii) Concepts related to occupational therapy practice, that shall include the following: (I) The importance of human occupation as a health determinant. (II) The use of self, interpersonal, and communication skills.	
(iv) Use of occupational therapy concepts and skills, that shall include the following: (I) Data collection, that shall include structured observation and interviews, history, and structured tests. (II) Participation in planning and implementation, that shall include: therapeutic intervention related to daily living skills and occupational components; therapeutic adaptation, including methods of accomplishing daily life tasks, environmental adjustments, orthotics, and assistive devices and equipment; health maintenance, including mental health techniques, energy conservation, joint protection, body mechanics, and positioning; and prevention programs to foster age-appropriate balance of self-care and work. (III) Program termination, including assisting in reevaluation, summary of occupational therapy outcome, and appropriate recommendations to maximize treatment gains. (IV) Documentation.	

I declare, under penalty of perjury of the laws of the State of California, that all of the information contained herein is true and correct.

Signature of Applicant

Date

OTA applicant